

On-The-Job Training Agreement

Idaho Transportation Department



This form must be completed by **ALL** signatories prior to the date training begins.

Privacy Act Statement: The information requested herein is used for training program statistical purposes and may not be otherwise disclosed without the express permission of the undersigned trainee. Privacy Act of 1975 (P.L. 93-579)

This agreement may be terminated by either of the parties, citing cause(s), with notification to the Idaho Transportation Department.

Part A (Completed By Contractor)

1. Contractor's Name and Address		2. Trade		3. Term (Hrs.)	
		4. Credit for Previous Experience (Hrs.)	5. Term Remaining (Hrs.)	6. Date Training Begins	
7. Related Instruction:	A. Number of Hours _____	B. Method <input type="checkbox"/> Classroom <input type="checkbox"/> Shop <input type="checkbox"/> Correspondence	C. Source <input type="checkbox"/> Voc. Ed. <input type="checkbox"/> Sponsor <input type="checkbox"/> Other	D. Trainee Wages for Related Instruction <input type="checkbox"/> Will be Paid <input type="checkbox"/> Will Not be Paid	E. Trainee Fees for Related Instruction <input type="checkbox"/> Will be Paid <input type="checkbox"/> Will Not be Paid
8. Trainee Wages					
A. The Trainee Schedule of Pay Shall Be Listed for Each Advancement Period		Period 1	Period 2	Period 3	Period 4
B. Terms (Hrs.)					
C. Percent of Journeyman Scale					
9. Journeyman to Whom Trainee is Assigned			10. Name and Address of Contractor Designee to Receive Complaints		
11. Authorized Representative's Signature (Employer/Contractor)		Date Signed			

Part B (Completed By Trainee)

12. Name (Last, First, Middle)	13. Race/Ethnic Group (Mark One) <input type="checkbox"/> White (Not Hispanic) <input type="checkbox"/> Black (Not Hispanic) <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Other (Specify) _____	14. Sex (Mark One) <input type="checkbox"/> Male <input type="checkbox"/> Female
15. Trainee's Signature		Date Signed

Part C (Completed By Resident Engineer)

16. Name	17. Approval Signature	18. Date
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Required Distribution: Original – Contractor's File

Copy – Resident Engineer

Copy – Trainee